

## FORM 4329B ANNUAL COMMERCIAL FEED TONNAGE REPORT

Washington State Department of Agriculture Pesticide Management Division PO Box 42591 Olympia WA 98504-2591 Telephone (360) 902-2080 FAX (360) 902-2093

(Please see instruction sheet for completing form)

This form must be completed if you listed any tonnage on line 1c of form 4329.

A REPORTING PERIOD: July 1 - June 30, 200 ( The Enter year)			
Enter the company name and company number listed on form 4329, box B:			COMPANY#
© Only Exempt Buyers may be listed on this form (see directions on page 3 of the instruction sheet.) List the facility/location name and address and the tons distributed. The information you provide on this form will be verifed against the inspection reports from the companies you have listed.			For Dept. Use Only Co. #
Company Name:		<u>TONS</u>	
Address:			
Company Name:			
Address:			
Company Name:			
Address:			
Company Name:			
Address:			
Company Name:			
Address:			
Company Name:			
Address:			
Company Name:			
Address:			
Company Name:			
Address:			
GRAND TOTAL: (This amount must equal the amount listed on form 4329, line 1c)		<u>D</u>	